

Best Available Copy

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	70203	10-20-99
O.I.P.E. CLASSIFIER		48	10/22/99
FORMALITY REVIEW	DM	72223	11/1/99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date	Claim	Date	Claim	Date
Final	Original	Final	Original	Final	Original
1	✓	51		110	
2	✓	52		112	
3	✓	53		113	
4	✓	54		114	
5	✓	55		115	
6	✓	56		116	
7	✓	57		117	
8	✓	58		118	
9	✓	59		119	
10	✓	60		120	
11	✓	61		121	
12	✓	62		122	
13	✓	63		123	
14	✓	64		124	
15	✓	65		125	
16	✓	66		126	
17	✓	67		127	
18	✓	68		128	
19	✓	69		129	
20	✓	70		130	
21	✓	71		131	
22	✓	72		132	
23	✓	73		133	
24	✓	74		134	
25	✓	75		135	
26	✓	76		136	
27	✓	77		137	
28	✓	78		138	
29	✓	79		139	
30	✓	80		140	
31	✓	81		141	
32	✓	82		142	
33	✓	83		143	
34	✓	84		144	
35	✓	85		145	
36	✓	86		146	
37	✓	87		147	
38	✓	88		148	
39	✓	89		149	
40	✓	90		150	
41	✓	91			
42	✓	92			
43	✓	93			
44	✓	94			
45	✓	95			
46	✓	96			
47	✓	97			
48	✓	98			
49	✓	99			
50	✓	100			

If more than 150 claims or 10 actions
staple additional sheet here

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